

WISCONSIN LEGISLATIVE COUNCIL STAFF

RULES CLEARINGHOUSE

Ronald Sklansky
Director
(608) 266-1946

Richard Sweet
Assistant Director
(608) 266-2982



David J. Stute, Director
Legislative Council Staff
(608) 266-1304

One E. Main St., Ste. 401
P.O. Box 2536
Madison, WI 53701-2536
FAX: (608) 266-3830

CLEARINGHOUSE RULE 94-178

Comments

[NOTE: All citations to “Manual” in the comments below are to the Administrative Rules Procedures Manual, prepared by the Revisor of Statutes Bureau and the Legislative Council Staff, dated October 1994.]

2. Form, Style and Placement in Administrative Code

a. In general, the department may wish to consider consolidating several definitions that appear in both ss. HSS 110.10 and 110.11 into the general chapter definitions that appear in s. HSS 110.03. For example, the definitions of the terms “prehospital setting” and “medical control” appear in both ss. HSS 110.10 and 110.11. It may be easier and more efficient simply to define these and other repeated terms in s. HSS 110.03, which defines terms for the entire chapter.

b. In s. HSS 110.03, the term “physician” is defined for the chapter as a person licensed to practice medicine or osteopathy under ch. 448, Stats. Is it necessary to repeatedly refer to a “physician licensed under ch. 448, Stats.” in the rule given the general definition of a physician? If it is not, the rule should be reviewed to eliminate any unnecessary references to a “physician licensed under ch. 448, Stats.” and replace them with references to “physician.”

c. The rule defines several terms that incorporate the term “EMT-basic” in the defined term. Yet, on a number of occasions, the rule refers to those terms using the term “emergency medical technician-basic.” For example, s. HSS 110.11 (6) (e) 1 refers to an “emergency medical technician-basic advanced airway plan,” although s. HSS 110.11 (4) (d) defines the term “EMT-basic advanced airway plan” or “plan.” The rule should be reviewed for consistent usage of defined terms.

In addition, several provisions of the rule refer to “EMTs-basic,” but s. HSS 110.11 (4) (c) refers to “EMT-basics.” The first term should be used consistently.

d. When several subunits of a rule appear in list form, each subunit should end with a period rather than a comma, a semicolon or the word “or” or “and.” This will facilitate insertion or deletion

of subunits in the future. [See s. 1.03 (intro.), Manual.] For example, in s. HSS 110.11 (6) (b), all of the subdivisions should end with periods and “do all of the following” should be inserted before the colon in par. (b) (intro.). This type of change should be made throughout the rule.

e. It would appear that the second sentence of s. HSS 110.11 (6) (b) 4 is inappropriately placed in the rule. Perhaps this sentence would be more appropriately located in a separate subsection identifying either the types of advanced airways that the department will approve or in a section identifying grounds for disapproving a plan.

f. In s. HSS 110.11 (9) (d), “physician assistant” should replace “physician’s assistant.” 1993 Wisconsin Act 105 made this terminology change in the statutes.

g. In s. HSS 110.11 (12) (c), “may” should replace “is authorized to.”

5. Clarity, Grammar, Punctuation and Use of Plain Language

a. Section HSS 110.11 (4) (a) defines an “advanced airway.” However, pars. (g) and (j) of that subsection refer only to “airways” and not “advanced airways” in their definitions of endotracheal tubes and non-visualized airways. Should the latter two paragraphs refer to “advanced airways”?

b. In s. HSS 110.11 (4) (j), what does it mean to insert an airway “without the requirement of visualization”?

c. In s. HSS 110.11 (5) (b), the reference to a “DHSS-approved” plan should be changed to a reference to a “department-approved” plan.

d. Perhaps the title to s. HSS 110.11 (7) (b) could be rewritten as “Optional functions of the program medical director.”

e. In s. HSS 110.11(7) (e) 3. a., what are interventions? It would appear that this term should be defined in the rule. Also, subdivision paragraphs d, e, g and h, what is meant by “intubated” and “intubation.” Since this term seems to be relevant to the use of advanced airways, it would seem appropriate to define it in the rule.

f. In s. HSS 110.11 (8) (c) (intro.), the rule could be simplified by replacing the phrase “an emergency medical technician shall” with the phrase “an individual shall.” In addition, what criteria must the service medical director and training course medical director use in determining whether to admit a person to the training program? It seems appropriate to identify the criteria in the rule.

g. In pars. (d) 5 and (e) 5 of s. HSS 110.11 (8), what is included in the “debriefing” of the students? Since it is not clear from the context of the rule what the debriefing includes, the rule should be clarified accordingly. Similarly, in pars. (d) 2 and (e) 2, it is not clear what is meant by the phrase “shall be designed to meet objectives for individual lessons developed and distributed by the department.”

h. Is the department approval of the proposed training course referred to in s. HSS 110.11 (8) (f) something that happens during the initial plan approval process or is it done at a later date? It is not entirely clear from the context of the rule when this must be done.

i. Section HSS 110.11 (8) (g) refers to both “emergency medical technicians” and “EMTs-basic,” Is there a reason for this distinction, since a person must be an EMT-basic to participate in the course?

j. In s. HSS 110.11 (11) (d) (intro.), it appears that the word “and” should be inserted between the word “physicians” and the phrase “emergency medical technician service providers.” Also, in par. (d) 3, “the” should precede “scene.”

k. In s. HSS 110.11 (12) (a) 3, is the department-approved written and practical skills examination the same examination required to complete the training course? If so, is not subd. 3 redundant? If not, more information should be provided in the rule about this examination.

In addition, this subsection of the rule also refers to a “person” requesting authorization to administer advanced airways. However, s. 146.50 (1) (L), Stats., defines a “person” to be, in part, an individual “concerned with the operation of an ambulance.” Is the intent of the rule to allow only EMTs-basic whose performance involves ambulances to administer advanced airways? [This comment relating to the use of the word “person” applies to the entire rule.] Finally, the subsection refers to persons “requesting” authorization to administer advanced airways. It appears, however, that the rule is silent on how a person makes such a request.

l. In s. HSS 110.11 (13), must the application for renewal of the advanced airway authorization be completed before the previously issued authorization expires?

m. In s. HSS 110.11 (14) (c), what is an ambulance attendant license? It does not appear that such a license is contemplated in ch. HSS 110.